Filing Company: RiverSource Life Insurance Company State Tracking Number:

Company Tracking Number: 411271C

TOI: A031 Individual Annuities - Deferred Variable Sub-TOI: A031.002 Flexible Premium

Product Name: Variable Annuities

Project Name/Number: Payout Rate Endorsement Filing/411271C

Filing at a Glance

Company: RiverSource Life Insurance Company

Product Name: Variable Annuities SERFF Tr Num: AEMN-128480172 State: Arkansas TOI: A03I Individual Annuities - Deferred SERFF Status: Closed-Approved- State Tr Num:

Variable Closed

Sub-TOI: A03I.002 Flexible Premium Co Tr Num: 411271C State Status: Approved-Closed

Reviewer(s): Linda Bird

Authors: Linda Elston, Jeff Disposition Date: 06/20/2012

Pederson, Susan Schmidt

Date Submitted: 06/15/2012 Disposition Status: Approved-

Closed

Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

Filing Description:

Filing Type: Form

General Information

Project Name: Payout Rate Endorsement Filing Status of Filing in Domicile: Pending

Project Number: 411271C Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Domicile Status Comments:

Market Type: Individual

Individual Market Type:

Overall Rate Impact: Filing Status Changed: 06/20/2012
State Status Changed: 06/20/2012

Deemer Date: Created By: Susan Schmidt

Submitted By: Susan Schmidt Corresponding Filing Tracking Number:

Subject: Individual Variable Annuity Submission

Form No. 411271C Unisex Endorsement Form No. 411375 Unisex Endorsement Form No. 411376 Sex-Distinct Endorsement

We wish to place the 3 variable annuity endorsement forms listed above on file for approval by the IIPRC.

These endorsements are to be used with contracts 411265 approved on 9/23/2009, your file number 43492, 411276

Filing Company: RiverSource Life Insurance Company State Tracking Number:

Company Tracking Number: 411271C

TOI: A031 Individual Annuities - Deferred Variable Sub-TOI: A031.002 Flexible Premium

Product Name: Variable Annuities

Project Name/Number: Payout Rate Endorsement Filing/411271C

approved on 9/24/2009, your file number 43480 and contract 411295 approved on 12/7/2009, your file number 44231. No part of this filing contains any unusual or controversial items from normal company or industry standards.

We plan to implement these new forms in late third quarter or in the fourth quarter. These variable forms are subject to federal jurisdiction, and accordingly the Flesch requirements do not apply.

ENDORSEMENT FORM

...Form 411271C (unisex rates)

The endorsement form will be mailed to contract holders with in-force contracts 411265, 411276 and 411295 that were issued as part of an employer sponsored retirement plan. Form 411271C corrects the rates for Plan D in both Table A and Table B in previously approved forms 411271(approved 9/23/2009, file number 43492) and 411271A (approved 11/18/2011, file number 50281). The guarantees are not changed by the endorsement, since the errors in the table were unintentional and not on the same basis as described on the form. The endorsement replaces the contract's table(s) of sex distinct guaranteed and variable AIR annuitization rates with unisex table(s) to comply with the Norris decision.

...Form 411375 (unisex rates)

This endorsement will be added to new issues of contracts 411265, 411276 and 411295 that are issued as part of employer sponsored retirement plans. This endorsement replaces the contract's table(s) of sex distinct guaranteed and variable AIR annuitization rates with unisex table(s) to comply with the Norris decision and changes the guaranteed payout rate from 2% to 1% for Table B. This endorsement form will replace form 411271A for new business and will be made part of the contract at issue.

...Form 411376 (sex distinct rates)

This endorsement will be added to new issues of contracts 411265, 411276 and 411295 issued as Non-Qualified or IRA plans, except for SEP-IRA or SIMPLE IRA plans. This endorsement replaces the contract's current table(s) of sex distinct guaranteed and variable AIR annuitization rates to change the Tables of Settlement rates provision in the contract as the guaranteed payout rate is changing from 2% to 1% for Table B.

To the best of our knowledge, these forms comply with the regulations of your state. Please call or email me if I can provide any further information to aid your review.

Sincerely,
Susan Schmidt
612-671-1734
Susan.2.Schmidt@ampf.com
State Narrative:

Filing Company: RiverSource Life Insurance Company State Tracking Number:

Company Tracking Number: 411271C

TOI: A031 Individual Annuities - Deferred Variable Sub-TOI: A031.002 Flexible Premium

Product Name: Variable Annuities

Project Name/Number: Payout Rate Endorsement Filing/411271C

Company and Contact

Filing Contact Information

Susan Schmidt, Sr. Contract Analyst Susan.2.Schmidt@ampf.com

9550 Ameriprise Financial Center 612-671-1734 [Phone] H25/9550 612-671-3866 [FAX]

Minneapolis, MN 55474

Filing Company Information

RiverSource Life Insurance Company CoCode: 65005 State of Domicile: Minnesota

9550 Ameriprise Financial Center Group Code: 4 Company Type: Life H25/9550 Group Name: State ID Number:

Minneapolis, MN 55474 FEIN Number: 41-0823832

(612) 671-2465 ext. [Phone]

Filing Fees

Fee Required? Yes

Fee Amount: \$125.00

Retaliatory? Yes

Fee Explanation: 125 is retaliatory

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

RiverSource Life Insurance Company \$125.00 06/15/2012 60188101

RiverSource Life Insurance Company \$25.00 06/18/2012 60208619

Filing Company: RiverSource Life Insurance Company State Tracking Number:

Company Tracking Number: 411271C

TOI: A031 Individual Annuities - Deferred Variable Sub-TOI: A031.002 Flexible Premium

Product Name: Variable Annuities

Project Name/Number: Payout Rate Endorsement Filing/411271C

Correspondence Summary

Dispositions

Status Created By Created On Date Submitted

Approved- Linda Bird 06/20/2012 06/20/2012

Closed

Objection Letters and Response Letters

Objection Letters Response Letters Status Date Submitted Created By Created On Date Submitted **Responded By Created On** Pending Linda Bird 06/18/2012 Susan Schmidt 06/18/2012 06/18/2012 06/18/2012 Industry Response

Filing Company: RiverSource Life Insurance Company State Tracking Number:

Company Tracking Number: 411271C

TOI: A031 Individual Annuities - Deferred Variable Sub-TOI: A031.002 Flexible Premium

Product Name: Variable Annuities

Project Name/Number: Payout Rate Endorsement Filing/411271C

Disposition

Disposition Date: 06/20/2012

Implementation Date: Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

Filing Company: RiverSource Life Insurance Company State Tracking Number:

Company Tracking Number: 411271C

TOI: A03I Individual Annuities - Deferred Variable Sub-TOI: A03I.002 Flexible Premium

Product Name: Variable Annuities

Project Name/Number: Payout Rate Endorsement Filing/411271C

Schedule	Schedule Item	Schedule Item Status Public Access
Supporting Document	Flesch Certification	Yes
Supporting Document	Application	Yes
Supporting Document	Life & Annuity - Acturial Memo	No
Supporting Document	Statement of Variability (SOV)	Yes
Form	Unisex Endorsement	Yes
Form	Unisex Endorsement	Yes
Form	Sex-Distinct Endorsement	Yes

Filing Company: RiverSource Life Insurance Company State Tracking Number:

Company Tracking Number: 411271C

TOI: A031 Individual Annuities - Deferred Variable Sub-TOI: A031.002 Flexible Premium

Product Name: Variable Annuities

Project Name/Number: Payout Rate Endorsement Filing/411271C

Objection Letter

Objection Letter Status Pending Industry Response

Objection Letter Date 06/18/2012
Submitted Date 06/18/2012
Respond By Date 07/18/2012

Dear Susan Schmidt,

This will acknowledge receipt of the captioned filing.

Objection 1

Comment:

Regulation 57 was revised effective January 2010, the filing fee is now \$50.00 per form. We will hold your filing in a pending status until the additional \$25.00 is received.

A.C.A. 23-79-109(1)-(5) sets forth the procedure by which filings may be deemed approved upon the expiration of certain time periods with no affirmative action by the commissioner. If the commissioner determines that additional information is needed to make a decision regarding approval, such request for information will be made to the company. The filing will not be considered complete until said additional information is received. The time periods set forth in this statute will not begin to run until the filing is complete.

Please feel free to contact me if you have questions.

Sincerely,

Linda Bird

Filing Company: RiverSource Life Insurance Company State Tracking Number:

Company Tracking Number: 411271C

TOI: A031 Individual Annuities - Deferred Variable Sub-TOI: A031.002 Flexible Premium

Product Name: Variable Annuities

Project Name/Number: Payout Rate Endorsement Filing/411271C

Response Letter

Response Letter Status Submitted to State

Response Letter Date 06/18/2012 Submitted Date 06/18/2012

Dear Linda Bird,

Comments:

Thank you for your note, our response is below.

Response 1

Comments: The additional \$25.00 has been submitted. Thank you for bringing this to my attention.

Related Objection 1

Comment:

Regulation 57 was revised effective January 2010, the filing fee is now \$50.00 per form. We will hold your filing in a pending status until the additional \$25.00 is received.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

If there is anything else that arises do not hesitate to contact me. Thank you for your continued review.

Sincerely,

Susan Schmidt

612-671-1734

Susan.2.Schmidt@ampf.com

Sincerely,

Jeff Pederson, Linda Elston, Susan Schmidt

Filing Company: RiverSource Life Insurance Company State Tracking Number:

Company Tracking Number: 411271C

TOI: A03I Individual Annuities - Deferred Variable Sub-TOI: A03I.002 Flexible Premium

Product Name: Variable Annuities

Project Name/Number: Payout Rate Endorsement Filing/411271C

Form Schedule

Lead Form Number: 411271C

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	411271C	Policy/Cont Unisex Endorsement ract/Fratern al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		0.000	411271C Unisex Endorsement. pdf
	411375	Policy/Cont Unisex Endorsement ract/Fratern al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Revised	Replaced Form #: 411271A Previous Filing #: 50281	0.000	411375 Unisex Endorsement. pdf
	411376	Policy/Cont Sex-Distinct ract/Fratern Endorsement al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		0.000	411376 Sex Distinct Endorsement. pdf

Variable Annuity Unisex Amendatory Endorsement

This endorsement is made a part of this contract to which it is attached and changes the following provisions of the contract. As part of an employer-sponsored retirement plan, this contract is issued on a unisex basis. All sex-distinct references in the contract are hereby deleted and replaced with unisex references. The following tables are substituted for those in the Tables of Annuity Rates section of the contract and any other attached endorsement.

Ta	able A - D	ollar Amount o	of First Mont	hly Variable <i>A</i>	Annuity Paymer	nt Per \$1,000) Applied
		Plan A		Plan B		Plan C	Plan D
Age at Annui- tization	Beginning In Year	Life Income Non-Refund	Five Years Certain	Life Income wit Ten Years Certain	h Fifteen Years Certain	Life Income Installment Refund	Joint & Survivor Non-Refund
Age 65	2010	5.92	5.89	5.82	5.71	5.72	5.24
	2015	5.84	5.82	5.76	5.65	5.66	5.20
	2020	5.77	5.75	5.70	5.60	5.61	5.16
	2025	5.71	5.69	5.64	5.55	5.55	5.12
	2030	5.65	5.63	5.59	5.51	5.51	5.09
	2035	5.59	5.58	5.54	5.47	5.46	5.05
Age 75	2010	7.71	7.59	7.24	6.75	7.08	6.41
	2015	7.56	7.45	7.14	6.68	6.97	6.31
	2020	7.41	7.32	7.04	6.62	6.87	6.23
	2025	7.28	7.19	6.94	6.56	6.78	6.15
	2030	7.16	7.08	6.85	6.50	6.69	6.07
	2035	7.04	6.97	6.76	6.45	6.61	6.00
Age 85	2010	11.74	10.89	9.17	7.61	9.65	9.05
	2015	11.39	10.65	9.06	7.58	9.45	8.83
	2020	11.07	10.41	8.96	7.56	9.28	8.64
	2025	10.77	10.19	8.87	7.53	9.11	8.46
	2030	10.50	9.98	8.77	7.51	8.95	8.29
	2035	10.24	9.78	8.67	7.48	8.80	8.14
Age 95	2010	20.07	15.29	10.35	7.82	14.24	14.67
	2015	19.49	15.13	10.34	7.82	14.05	14.34
	2020	18.97	14.97	10.33	7.82	13.87	14.03
	2025	18.48	14.82	10.32	7.81	13.69	13.75
	2030	18.03	14.67	10.31	7.81	13.52	13.50
	2035	17.61	14.53	10.30	7.81	13.37	13.26
Age 100	2010	27.80	17.29	10.49	7.82	18.18	20.08
	2015	27.60	17.28	10.49	7.82	18.14	19.97
	2020	27.41	17.26	10.49	7.82	18.10	19.87
	2025	27.22	17.25	10.49	7.82	18.06	19.77
	2030	27.04	17.24	10.49	7.82	18.02	19.68
	2035	26.86	17.22	10.49	7.82	17.98	19.59

Table A above is based on the "Annuity 2000 Mortality Table" with 100% Projection Scale G and a 5% assumed investment return. Annuity Payment rates for any plan and for any year, age, or any combination of year and age not shown above, will be calculated on the same basis as those rates shown in the Table above. Such rates will be furnished by us upon request. Amounts shown in the Table below are based on a 5% assumed investment return.

Plan E - De	Plan E - Dollar Amount of First Monthly Variable Annuity Payment Per \$1,000 Applied										
Years Payable	Monthly Payment	Years Payable	Monthly Payment	Years Payable	Monthly Payment						
10	10.51	17	7.20	24	5.88						
11	9.77	18	6.94	25	5.76						
12	9.16	19	6.71	26	5.65						
13	8.64	20	6.51	27	5.54						
14	8.20	21	6.33	28	5.45						
15	7.82	22	6.17	29	5.36						
16	7.49	23	6.02	30	5.28						

Fixed Dollar annuity payments will not be less than those shown in Table B. In addition, the amount of such payments will not be less than that which would be provided if a single payment immediate annuity contract then offered by us to annuitants in the same class were to be purchased with the surrender value of the contract.

	Tubic B	Plan A	Ci Lacii Monti	Plan B	Annuity Paymen	Plan C	Plan D
Age at Annui- tization	Beginning In Year	Life Income Non-Refund	Five Years Certain	Life Income wit Ten Years Certain	h Fifteen Years Certain	Life Income Installment Refund	Joint & Survivor Non-Refund
Age 65	2010	4.19	4.18	4.13	4.05	3.86	3.57
	2015	4.12	4.10	4.06	3.99	3.81	3.52
	2020	4.05	4.04	4.00	3.93	3.77	3.48
	2025	3.98	3.97	3.94	3.88	3.72	3.44
	2030	3.92	3.92	3.89	3.83	3.68	3.40
	2035	3.87	3.86	3.84	3.79	3.64	3.37
Age 75	2010	5.98	5.90	5.64	5.21	5.06	4.81
	2015	5.84	5.77	5.53	5.14	4.98	4.71
	2020	5.70	5.64	5.43	5.07	4.90	4.63
	2025	5.57	5.52	5.33	5.01	4.82	4.55
	2030	5.45	5.40	5.24	4.94	4.75	4.47
	2035	5.34	5.30	5.15	4.88	4.69	4.41
Age 85	2010	9.93	9.26	7.72	6.18	7.20	7.47
	2015	9.60	9.02	7.61	6.16	7.05	7.26
	2020	9.30	8.78	7.50	6.13	6.92	7.07
	2025	9.01	8.56	7.40	6.10	6.80	6.89
	2030	8.75	8.35	7.30	6.08	6.68	6.73
	2035	8.51	8.16	7.20	6.05	6.58	6.59
Age 95	2010	18.18	13.86	9.00	6.41	11.10	13.08
	2015	17.63	13.70	8.99	6.41	10.97	12.77
	2020	17.13	13.54	8.98	6.41	10.85	12.47
	2025	16.67	13.38	8.97	6.41	10.74	12.21
	2030	16.24	13.23	8.96	6.41	10.64	11.96
	2035	15.84	13.09	8.95	6.41	10.55	11.74
Age 100	2010	25.92	15.97	9.16	6.42	14.46	18.49
	2015	25.73	15.96	9.16	6.42	14.43	18.39
	2020	25.54	15.95	9.16	6.42	14.41	18.29
	2025	25.36	15.93	9.16	6.42	14.38	18.20
	2030	25.19	15.92	9.16	6.42	14.36	18.11
	2035	25.02	15.91	9.16	6.42	14.33	18.02

Table B above is based on the "Annuity 2000 Mortality Table" at 2.0% annual effective interest rate with 100% Projection Scale G. Annuity Payment rates for any plan and for any year, age, or any combination of year and age not shown above, will be calculated on the same basis as those rates shown in the Table above. Such rates will be furnished by us upon request. Amounts shown in the Table below are based on a 2.0% annual effective interest rate.

Plan E	Plan E - Dollar Amount of Each Monthly Fixed Dollar Annuity Payment Per \$1,000 Applied										
Years Payable Monthly Payment Years Payable Monthly Payment Years Payable Monthly Payment											
10	9.18	17	5.77	24	4.36						
11	8.42	18	5.50	25	4.22						
12	7.80	19	5.26	26	4.10						
13	7.26	20	5.04	27	3.98						
14	6.81	21	4.85	28	3.87						
15	6.42	22	4.67	29	3.77						
16	6.07	23	4.51	30	3.68						

This endorsement is issued and effective as of the contract date of this contract.

RiverSource Life Insurance Company

Thomas R. Move

Secretary

Variable Annuity Unisex Endorsement

This endorsement is made a part of this contract to which it is attached and changes the following provisions of the contract. As part of an employer-sponsored retirement plan, this contract is issued on a unisex basis. All sex-distinct references in the contract are hereby deleted and replaced with unisex references. The following tables are substituted for those in the Tables of Annuity Rates section of the contract.

Ta	able A - Do	ollar Amount o	of First Montl	hly Variable <i>A</i>	Annuity Payme	nt Per \$1,000	O Applied
		Plan A		Plan B		Plan C	Plan D
Age at Annui- tization	Beginning In Year	Life Income Non-Refund	Five Years Certain	Life Income wit Ten Years Certain	h Fifteen Years Certain	Life Income Installment Refund	Joint & Survivor Non-Refund
Age 65	2015	5.84	5.82	5.76	5.65	5.66	5.20
	2020	5.77	5.75	5.70	5.60	5.61	5.16
	2025	5.71	5.69	5.64	5.55	5.55	5.12
	2030	5.65	5.63	5.59	5.51	5.51	5.09
	2035	5.59	5.58	5.54	5.47	5.46	5.05
	2040	5.54	5.52	5.49	5.42	5.42	5.03
Age 75	2015	7.56	7.45	7.14	6.68	6.97	6.31
	2020	7.41	7.32	7.04	6.62	6.87	6.23
	2025	7.28	7.19	6.94	6.56	6.78	6.15
	2030	7.16	7.08	6.85	6.50	6.69	6.07
	2035	7.04	6.97	6.76	6.45	6.61	6.00
	2040	6.93	6.87	6.68	6.39	6.53	5.94
Age 85	2015	11.39	10.65	9.06	7.58	9.45	8.83
	2020	11.07	10.41	8.96	7.56	9.28	8.64
	2025	10.77	10.19	8.87	7.53	9.11	8.46
	2030	10.50	9.98	8.77	7.51	8.95	8.29
	2035	10.24	9.78	8.67	7.48	8.80	8.14
	2040	10.01	9.59	8.58	7.46	8.67	8.00
Age 95	2015	19.49	15.13	10.34	7.82	14.05	14.34
	2020	18.97	14.97	10.33	7.82	13.87	14.03
	2025	18.48	14.82	10.32	7.81	13.69	13.75
	2030	18.03	14.67	10.31	7.81	13.52	13.50
	2035	17.61	14.53	10.30	7.81	13.37	13.26
	2040	17.22	14.39	10.29	7.81	13.23	13.05
Age 100	2015	27.60	17.28	10.49	7.82	18.14	19.97
	2020	27.41	17.26	10.49	7.82	18.10	19.87
	2025	27.22	17.25	10.49	7.82	18.06	19.77
	2030	27.04	17.24	10.49	7.82	18.02	19.68
	2035	26.86	17.22	10.49	7.82	17.98	19.59
	2040	26.69	17.21	10.49	7.82	17.94	19.50

Table A above is based on the "Annuity 2000 Mortality Table" with 100% Projection Scale G and a 5% assumed investment return. Annuity Payment rates for any plan and for any year, age, or any combination of year and age not shown above, will be calculated on the same basis as those rates shown in the Table above. Such rates will be furnished by us upon request. Amounts shown in the Table below are based on a 5% assumed investment return.

Plan E - Do	Plan E - Dollar Amount of First Monthly Variable Annuity Payment Per \$1,000 Applied									
Years Payable	Monthly Payment	Years Payable	Monthly Payment	Years Payable	Monthly Payment					
10	10.51	17	7.20	24	5.88					
11	9.77	18	6.94	25	5.76					
12	9.16	19	6.71	26	5.65					
13	8.64	20	6.51	27	5.54					
14	8.20	21	6.33	28	5.45					
15	7.82	22	6.17	29	5.36					
16	7.49	23	6.02	30	5.28					

411375 Page 1 1

Fixed Dollar annuity payments will not be less than those shown in Table B. In addition, the amount of such payments will not be less than that which would be provided if a single payment immediate annuity contract then offered by us to annuitants in the same class were to be purchased with the surrender value of the contract.

	Table B		of Each Month		Annuity Paymen		
		Plan A		Plan B		Plan C	Plan D
Age at Annui- tization	Beginning In Year	Life Income Non-Refund	Five Years Certain	Life Income wit Ten Years Certain	h Fifteen Years Certain	Life Income Installment Refund	Joint & Survivor Non-Refund
Age 65	2015	3.59	3.58	3.55	3.49	3.16	3.03
	2020	3.53	3.52	3.49	3.43	3.13	2.98
	2025	3.47	3.46	3.43	3.38	3.09	2.94
	2030	3.41	3.40	3.38	3.33	3.05	2.91
	2035	3.35	3.35	3.33	3.28	3.02	2.88
	2040	3.30	3.30	3.28	3.24	2.99	2.85
Age 75	2015	5.30	5.24	5.03	4.66	4.19	4.22
	2020	5.16	5.11	4.92	4.60	4.13	4.14
	2025	5.04	4.99	4.83	4.53	4.07	4.06
	2030	4.92	4.88	4.73	4.46	4.01	3.99
	2035	4.82	4.78	4.65	4.40	3.96	3.92
	2040	4.71	4.68	4.56	4.34	3.91	3.86
Age 85	2015	9.02	8.48	7.14	5.71	6.02	6.76
	2020	8.72	8.25	7.04	5.68	5.92	6.57
	2025	8.44	8.03	6.93	5.66	5.83	6.40
	2030	8.19	7.83	6.83	5.63	5.74	6.24
	2035	7.95	7.63	6.73	5.60	5.66	6.10
	2040	7.73	7.45	6.63	5.57	5.59	5.97
Age 95	2015	17.02	13.23	8.56	5.97	9.50	12.25
	2020	16.52	13.07	8.55	5.97	9.41	11.96
	2025	16.06	12.91	8.54	5.97	9.33	11.70
	2030	15.64	12.76	8.53	5.97	9.26	11.46
	2035	15.25	12.62	8.52	5.97	9.19	11.24
	2040	14.89	12.48	8.51	5.97	9.11	11.04
Age 100	2015	25.09	15.53	8.73	5.98	12.56	17.86
	2020	24.91	15.51	8.73	5.98	12.54	17.77
	2025	24.74	15.50	8.73	5.98	12.52	17.68
	2030	24.57	15.48	8.73	5.98	12.50	17.59
	2035	24.40	15.47	8.73	5.98	12.48	17.50
	2040	24.24	15.46	8.73	5.98	12.46	17.42

Table B above is based on the "Annuity 2000 Mortality Table" at 1.0% annual effective interest rate with 100% Projection Scale G. Annuity Payment rates for any plan and for any year, age, or any combination of year and age not shown above, will be calculated on the same basis as those rates shown in the Table above. Such rates will be furnished by us upon request. Amounts shown in the Table below are based on a 1.0% annual effective interest rate.

_	Plan E	- Dollar Amount of E	Each Monthly Fixe	d Dollar Annuity Pay	ment Per \$1,000	Applied
	Years Payable	Monthly Payment	Years Payable	Monthly Payment	Years Payable	Monthly Payment
	10	8.75	17	5.33	24	3.90
	11	7.99	18	5.05	25	3.76
	12	7.36	19	4.81	26	3.64
	13	6.83	20	4.59	27	3.52
	14	6.37	21	4.40	28	3.41
	15	5.98	22	4.22	29	3.31
	16	5.63	23	4.05	30	3.21

This endorsement is issued and effective as of the contract date of this contract.

RiverSource Life Insurance Company

Secretary

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1 A (07/2012)

Variable Annuity Endorsement

This endorsement is made a part of this contract to which it is attached and changes the following provisions of the contract. The following tables are substituted for those in the Tables of Annuity Rates section of the contract.

T	able A -	Dollar A	mount	of First	Month	ly Varia	ble Annı	ity Pay	ment F	Per \$1,0	00 App	lied
		Pla	n A			Pla	an B			Pla	n C	Plan D
Age at Annui- tization	Beginning In Year	Life In Non-R Male			Years tain Female	Ten Yea	ome with rs Certain Female	Cer	ı Years tain Female	Life Income Installment Refund Male Female		Joint & Survivor Non-Refund Male & Female Same Age
Age 65	2015	6.33	5.84	6.28	5.82	6.15	5.76	5.95	5.65	6.00	5.66	5.30
	2020	6.24	5.77	6.20	5.75	6.09	5.70	5.90	5.60	5.94	5.61	5.26
	2025	6.16	5.71	6.13	5.69	6.02	5.64	5.85	5.55	5.88	5.55	5.21
	2030	6.09	5.65	6.05	5.63	5.96	5.59	5.80	5.51	5.82	5.51	5.18
	2035	6.01	5.59	5.99	5.58	5.90	5.54	5.75	5.47	5.77	5.46	5.14
	2040	5.95	5.54	5.92	5.52	5.84	5.49	5.71	5.42	5.72	5.42	5.11
Age 75	2015	8.34	7.56	8.13	7.45	7.59	7.14	6.91	6.68	7.43	6.97	6.50
	2020	8.17	7.41	7.98	7.32	7.49	7.04	6.86	6.62	7.32	6.87	6.40
	2025	8.02	7.28	7.84	7.19	7.39	6.94	6.81	6.56	7.22	6.78	6.32
	2030	7.87	7.16	7.71	7.08	7.30	6.85	6.75	6.50	7.12	6.69	6.24
	2035	7.73	7.04	7.59	6.97	7.21	6.76	6.70	6.45	7.03	6.61	6.16
	2040	7.60	6.93	7.47	6.87	7.12	6.68	6.65	6.39	6.94	6.53	6.09
Age 85	2015	12.33	11.39	11.26	10.65	9.29	9.06	7.64	7.58	9.91	9.45	9.09
	2020	12.00	11.07	11.04	10.41	9.21	8.96	7.62	7.56	9.74	9.28	8.89
	2025	11.70	10.77	10.83	10.19	9.13	8.87	7.60	7.53	9.57	9.11	8.70
	2030	11.42	10.50	10.63	9.98	9.04	8.77	7.58	7.51	9.42	8.95	8.53
	2035	11.15	10.24	10.44	9.78	8.96	8.67	7.56	7.48	9.28	8.80	8.37
	2040	10.90	10.01	10.26	9.59	8.88	8.58	7.55	7.46	9.14	8.67	8.23
Age 95	2015	20.42	19.49	15.45	15.13	10.37	10.34	7.82	7.82	14.49	14.05	14.63
	2020	19.94	18.97	15.32	14.97	10.36	10.33	7.82	7.82	14.33	13.87	14.34
	2025	19.50	18.48	15.20	14.82	10.36	10.32	7.82	7.81	14.17	13.69	14.07
	2030	19.09	18.03	15.08	14.67	10.35	10.31	7.82	7.81	14.03	13.52	13.82
	2035	18.70	17.61	14.96	14.53	10.34	10.30	7.82	7.81	13.90	13.37	13.59
	2040	18.33	17.22	14.84	14.39	10.34	10.29	7.82	7.81	13.76	13.23	13.38
Age 100	2015 2020 2025 2030 2035 2040	28.93 28.76 28.59 28.42 28.26 28.10	27.60 27.41 27.22 27.04 26.86 26.69	17.47 17.46 17.45 17.44 17.44	17.28 17.26 17.25 17.24 17.22 17.21	10.50 10.50 10.50 10.50 10.50	10.49 10.49 10.49 10.49 10.49 10.49	7.82 7.82 7.82 7.82 7.82 7.82	7.82 7.82 7.82 7.82 7.82 7.82	18.76 18.72 18.69 18.65 18.62 18.58	18.14 18.10 18.06 18.02 17.98 17.94	20.41 20.31 20.22 20.13 20.04 19.96

Table A above is based on the "Annuity 2000 Mortality Table" with 100% Projection Scale G and a 5% assumed investment return. Annuity Payment rates for any plan and for any year, age, or any combination of year, age and sex not shown above, will be calculated on the same basis as those rates shown in the Table above. Such rates will be furnished by us upon request. Amounts shown in the Table below are based on a 5% assumed investment return.

Plan E - D	Plan E - Dollar Amount of First Monthly Variable Annuity Payment Per \$1,000 Applied										
Years Payable	Monthly Payment	Years Payable	Monthly Payment	Years Payable	Monthly Payment						
10	10.51	17	7.20	24	5.88						
11	9.77	18	6.94	25	5.76						
12	9.16	19	6.71	26	5.65						
13	8.64	20	6.51	27	5.54						
14	8.20	21	6.33	28	5.45						
15	7.82	22	6.17	29	5.36						
16	7.49	23	6.02	30	5.28						

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Fixed Dollar annuity payments will not be less than those shown in Table B. In addition, the amount of such payments will not be less than that which would be provided if a single payment immediate annuity contract then offered by us to annuitants in the same class were to be purchased with the surrender value of the contract.

Tal	ole B - Do	llar Am	ount of	Each N	Nonthly	Fixed	Dollar An	nuity P	aymen	t Per \$1	,000 A	pplied
		Pla	n A			PI	an B			Pla	n C	Plan D
Age at Annui- tization	Beginning In Year		ncome Refund Female		Years rtain Female	Ten Yea	ome with irs Certain Female	Cer	ı Years tain Female	Installme	icome nt Refund Female	Joint & Survivor Non-Refund Male & Female Same Age
Age 65	2015	4.03	3.59	4.01	3.58	3.93	3.55	3.80	3.49	3.36	3.16	3.13
	2020	3.95	3.53	3.93	3.52	3.86	3.49	3.74	3.43	3.32	3.13	3.08
	2025	3.87	3.47	3.85	3.46	3.80	3.43	3.69	3.38	3.28	3.09	3.04
	2030	3.80	3.41	3.78	3.40	3.73	3.38	3.63	3.33	3.24	3.05	3.00
	2035	3.73	3.35	3.72	3.35	3.67	3.33	3.58	3.28	3.20	3.02	2.96
	2040	3.67	3.30	3.66	3.30	3.61	3.28	3.58	3.24	3.17	2.99	2.93
Age 75	2015	5.99	5.30	5.87	5.24	5.49	5.03	4.92	4.66	4.45	4.19	4.40
	2020	5.84	5.16	5.72	5.11	5.38	4.92	4.86	4.60	4.38	4.13	4.31
	2025	5.69	5.04	5.59	4.99	5.28	4.83	4.80	4.53	4.31	4.07	4.22
	2030	5.55	4.92	5.46	4.88	5.18	4.73	4.74	4.46	4.25	4.01	4.14
	2035	5.43	4.82	5.34	4.78	5.09	4.65	4.68	4.40	4.19	3.96	4.07
	2040	5.30	4.71	5.23	4.68	5.00	4.56	4.62	4.34	4.14	3.91	4.00
Age 85	2015	9.88	9.02	9.10	8.48	7.39	7.14	5.77	5.71	6.30	6.02	7.00
	2020	9.58	8.72	8.88	8.25	7.30	7.04	5.75	5.68	6.19	5.92	6.81
	2025	9.30	8.44	8.67	8.03	7.21	6.93	5.73	5.66	6.10	5.83	6.63
	2030	9.03	8.19	8.47	7.83	7.12	6.83	5.71	5.63	6.02	5.74	6.47
	2035	8.78	7.95	8.28	7.63	7.04	6.73	5.69	5.60	5.94	5.66	6.32
	2040	8.55	7.73	8.10	7.45	6.95	6.63	5.67	5.57	5.86	5.59	6.19
Age 95	2015	17.92	17.02	13.57	13.23	8.60	8.56	5.98	5.97	9.82	9.50	12.54
	2020	17.48	16.52	13.44	13.07	8.59	8.55	5.98	5.97	9.73	9.41	12.26
	2025	17.06	16.06	13.31	12.91	8.59	8.54	5.98	5.97	9.66	9.33	12.01
	2030	16.67	15.64	13.19	12.76	8.58	8.53	5.98	5.97	9.59	9.26	11.78
	2035	16.31	15.25	13.07	12.62	8.57	8.52	5.98	5.97	9.52	9.19	11.56
	2040	15.97	14.89	12.95	12.48	8.56	8.51	5.98	5.97	9.46	9.11	11.36
Age 100	2015 2020 2025 2030 2035 2040	26.42 26.25 26.09 25.94 25.79 25.64	25.09 24.91 24.74 24.57 24.40 24.24	15.74 15.73 15.72 15.71 15.70 15.69	15.53 15.51 15.50 15.48 15.47 15.46	8.74 8.74 8.74 8.74 8.74	8.73 8.73 8.73 8.73 8.73 8.73	5.98 5.98 5.98 5.98 5.98 5.98	5.98 5.98 5.98 5.98 5.98 5.98	13.01 12.99 12.97 12.95 12.93 12.92	12.56 12.54 12.52 12.50 12.48 12.46	18.30 18.21 18.12 18.04 17.95 17.87

Table B above is based on the "Annuity 2000 Mortality Table" at 1.0% annual effective interest rate with 100% Projection Scale G. Annuity Payment rates for any plan and for any year, age, or any combination of year, age and sex not shown above, will be calculated on the same basis as those rates shown in the Table above. Such rates will be furnished by us upon request. Amounts shown in the Table below are based on a 1.0% annual effective interest rate.

Plan E - Dollar Amount of Each Monthly Fixed Dollar Annuity Payment Per \$1,000 Appli	ied
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_					
Years Payable	Monthly Payment	Years Payable	Monthly Payment	Years Payable	Monthly Payment
10	8.75	17	5.33	24	3.90
11	7.99	18	5.05	25	3.76
12	7.36	19	4.81	26	3.64
13	6.83	20	4.59	27	3.52
14	6.37	21	4.40	28	3.41
15	5.98	22	4.22	29	3.31
16	5.63	23	4.05	30	3.21

This endorsement is issued and effective as of the contract date of this contract.

RiverSource Life Insurance Company

Secretary R. Move

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Filing Company: RiverSource Life Insurance Company State Tracking Number:

Company Tracking Number: 411271C

TOI: A031 Individual Annuities - Deferred Variable Sub-TOI: A031.002 Flexible Premium

Product Name: Variable Annuities

Project Name/Number: Payout Rate Endorsement Filing/411271C

Supporting Document Schedules

Item Status: Status

Date:

Satisfied - Item: Flesch Certification

Comments:

These variable forms are subject to federal jurisdiction, and accordingly the Flesch requirements do not apply.

Consumer Information Notices and Certification attached.

Attachments:

AR Guaranty Assn Notice.pdf AR Information Notice.pdf AR CERTIFICATION.pdf

Item Status: Status

Date:

Satisfied - Item: Application

Comments:

Qualified Applications 411356 and 411357 approved on 11/18/2011 your file number 50281.

411318 approved on 11/5/2010 your file number 47194.

Item Status: Status

Date:

Bypassed - Item: Life & Annuity - Acturial Memo

Bypass Reason: Not applicable for this endorsement only filing.

Comments:

Item Status: Status

Date:

Satisfied - Item: Statement of Variability (SOV)

Comments:

SOV for 411375 and 411376. An SOV for 411271C is not necessary.

Attachment:

Statement of Variability 411375, 411376.pdf

LIMITATIONS AND EXCLUSIONS UNDER THE ARKANSAS LIFE AND HEALTH INSURANCE GUARANTY ASSOCIATION ACT

Residents of this state who purchase life insurance, annuities or health and accident insurance should know that the insurance companies licensed in this state to write these types of insurance are members of the Arkansas Life and Health Insurance Guaranty Association ("Guaranty Association"). The purpose of the Guaranty Association is to assure that policy and contract owners will be protected, within certain limits, in the unlikely event that a member insurer becomes financially unable to meet its obligations. If this should happen, the Guaranty Association will assess its other member insurance companies for the money to pay the claims of policy owners who live in this state and, in some cases, to keep coverage in force. The valuable extra protection provided by the member insurers through the Guaranty Association is not unlimited, however. And, as noted in the box below, this protection is not a substitute for consumers' care in selecting insurance companies that are well managed and financially stable.

DISCLAIMER

The Arkansas Life and Health Insurance Guaranty Association ("Guaranty Association") may not provide coverage for this policy. If coverage is provided, it may be subject to substantial limitations or exclusions and require continued residency in this state. You should not rely on coverage by the Guaranty Association in purchasing an insurance policy or contract.

Coverage is NOT provided for your policy or contract or any portion of it that is not guaranteed by the insurer or for which you have assumed the risk, such as non-guaranteed amounts held in a separate account under a variable life or variable annuity contract.

Insurance companies or their agents are required by law to provide you with this notice. However, insurance companies and their agents are prohibited by law from using the existence of the Guaranty Association to induce you to purchase any kind of insurance policy.

The Arkansas Life and Health Insurance Guaranty Association c/o The Liquidation Division 1023 West Capitol Little Rock, Arkansas 72201

Arkansas Insurance Department 1200 West Third Street Little Rock, Arkansas 72201-1904

The state law that provides for this safety-net is called the Arkansas Life and Health Insurance Guaranty Association Act ("Act"). Below is a brief summary of the Act's coverages, exclusions and limits. This summary does not cover all provisions of the Act; nor does it in any way change anyone's rights or obligations under the Act or the rights or obligations of the Guaranty Association.

COVERAGE

Generally, individuals will be protected by the Guaranty Association if they live in this state and hold a life, annuity, or health insurance contract or policy, or if they are insured under a group insurance contract issued by a member insurer. The beneficiaries, payees or assignees of policy or contract owners are protected as well, even if they live in another state.

EXCLUSIONS FROM COVERAGE

However, persons owning such policies are NOT protected by the Guaranty Association if:

- They are eligible for protection under the laws of another state (this may occur when the insolvent insurer was incorporated in another state whose guaranty association protects insured who live outside that state):
- The insurer was not authorized to do business in this state;
- Their policy or contract was issued by a nonprofit hospital or medical service organization, an HMO, a fraternal benefit society, a mandatory sate pooling plan, a mutual assessment company or similar plan in which the policy or contract owner is subject to future assessments, or by an insurance exchange.

The Guaranty Association also does NOT provide coverage for:

- Any policy or contract or portion thereof which is not guaranteed by the insurer or for which the owner
 has assumed the risk, such as non-guaranteed amounts held in a separate account under a variable
 life or variable annuity contract;
- Any policy of reinsurance (unless an assumption certificate was issued);
- Interest rate yields that exceed an average rate;
- Dividends and voting rights and experience rating credits;
- Credits given in connection with the administration of a policy by a group or contract holder;
- Employers' plans to the extent they are self-funded (that is, not insured by an insurance company, even if an insurance company administers them);
- Unallocated annuity contracts (which give rights to group contract holders, not individuals);
- Unallocated annuity contracts issued to/in connection with benefit plans protected under Federal Pension Benefit Corporation ("FPBC") (whether the FPBC is yet liable or not);
- Portions of an allocated annuity contract not owned by a benefit plan or a government lottery (unless the owner is a resident) or issued to a collective investment trust or similar pooled fund offered by a bank or other financial institution;
- Portions of a policy or contract to the extent assessments required by law for the Guaranty Association are preempted by State or Federal law;
- Obligations that do not arise under the policy or contract, including claims based on marketing materials
 or side letters, riders, or other documents which do not meet filing requirements, or claims for policy
 misrepresentations, or extra-contractual or penalty claims;
- Contractual agreements establishing the member insurer's obligations to provide book value
 accounting guarantees for defined contribution benefit plan participants (by reference to a portfolio of
 assets owned by a nonaffiliated benefit plan or its trustees).

LIMITS ON AMOUNT OF COVERAGE

The Act also limits the amount the Guaranty Association is obligated to cover: The Guaranty Association cannot pay more than what the insurance company would owe under a policy or contract. Also, for any one insured life, the Guaranty Association will pay a maximum of \$300,000 - no matter how many policies and contracts there were with the same company, even if they provided different types of coverages. Within this overall \$300,000 limit, the Association will not pay more than \$300,000 in health insurance benefits, \$300,000 in present value of annuity benefits, or \$300,000 in life insurance death benefits or net cash surrender values – again, no matter how many polices and contracts there were with the same company, and no matter how many different types of coverages. There is a \$1,000,000 limit with respect to any contract holder for unallocated annuity benefits, irrespective of the number of contracts held by the contract holder. These are limitations for which the Guaranty Association is obligated before taking into account either its subrogation and assignment rights or the extent to which those benefits could be provided out of the assets of the impaired or insolvent insurer.

RiverSource Life Insurance Company

70100 Ameriprise Financial Center Minneapolis, MN 55474

John Doe Policy number

Questions Regarding Your Policy?

If you have questions regarding your policy, you may contact the following:

RiverSource Life Insurance Company Policyowner Service Department

70100 Ameriprise Financial Center Minneapolis, MN 55474

Tele: 1-800-862-7919 (Hours are 7 am - 8 pm Central Standard time)

Representative Name: I. Am Agent

Representative Address: 1234 State St.

Anytown, USA

If we at RiverSource Life Insurance Company fail to provide you with reasonable and adequate service, you should feel free to contact:

Arkansas Insurance Department Consumer Services Division 1200 West Third Street Little Rock, AR 72201-1904

Tele: 1-800-852-5494

STATE OF ARKANSAS

CERTIFICATION OF COMPLIANCE

Form: 411271C, 411275, 411276
We certify that the above forms being submitted meet the provisions of Rule 19 of the
Arkansas Insurance Department Rules and Regulations as well as all applicable
requirements of the Department.
I, Jeffrey R. Pederson, Assistant Secretary of RiverSource Life Insurance Company, further
certify that I am familiar with the applicable laws, rules and regulations of the State of
Arkansas, and that to the best of my knowledge, information and belief, the form submitted
with this letter are in compliance in all respects with the provisions of the Insurance Laws,
Rules and Regulations of the State of Arkansas.
Jeff R. Peduro
RiverSource Life Insurance Company Jeffrey R. Pederson, Assistant Secretary

Date: <u>June 15, 2012</u>

Statement of Variability

411375 Variable Unisex Rates Endorsement 411376 Variable Sex-Distinct Endorsement

The form is designed for use with different RiverSource Life Insurance Company (RiverSource Life) variable annuity products. Below is a description of the bracketed items. We reserve the right to correct typographical errors, and to vary the typestyle, paper, weight and ink color to accommodate future generations of this form. However, any adaptation RiverSource Life makes will not involve changes to the text without prior approval and will always meet or exceed the requirements of your state.

- Version letter/print date. Bracketed for use for internal administrative information. The version letter/print date will be changed if any future changes are made to items bracketed as variable. The range will be A Z EXCEPT never "B, I, O, Q, or S". The date range will also use 01-12 for the months and the last two numbers of a year, from 2012 to future years.
- 2. Table B and E. Payment amounts may change based on the annual effective interest rate.
- 3. Annual effective interest rate. Range is from 0.25% to 3.00%. Currently it is 1%.
- 4. Officer Signature. The officer signature is bracketed to indicate that the name may change.